



Document 2016 GW2749

Book 2016 Page 2749 Type 43 001 Pages 4

Date 9/20/2016 Time 1:37:46PM

Rec Amt \$.00

INDX
ANNO
SCAN

LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

CHEK

**REAL ESTATE TRANSFER - GROUNDWATER HAZARD STATEMENT
TO BE COMPLETED BY TRANSFEROR**

TRANSFEROR:

Name Jeffrey L. Drummond

Address 1405 Tree Line Ct Van Meter IA 50261
Number and Street or RR City, Town or P.O. State Zip

TRANSFeree:

Name Keith J. Moore

Address 30019 Sieverding Ridge Rd Bellevue IA 52031
Number and Street or RR City, Town or P.O. State Zip

Address of Property Transferred:

1405 Tree Line Ct Van Meter IA 50261
Number and Street or RR City, Town or P.O. State Zip

Legal Description of Property: (Attach if necessary)

Lot Twenty-eight (28) of Phase II, Timber Ridge Estates, located in the Northeast Quarter (1/4) of Section Twenty-nine (29) in Township Seventy-seven (77) North, Range Twenty-six (26) West of the 5th P.M., Madison County, Iowa.

1. Wells (check one)

- There are no known wells situated on this property.
- There is a well or wells situated on this property. The type(s), location(s) and legal status are stated below or set forth on an attached separate sheet, as necessary.

2. Solid Waste Disposal (check one)

- There is no known solid waste disposal site on this property.
- There is a solid waste disposal site on this property and information related thereto is provided in Attachment #1, attached to this document.

3. Hazardous Wastes (check one)

- There is no known hazardous waste on this property.
- There is hazardous waste on this property and information related thereto is provided in Attachment #1, attached to this document.

4. Underground Storage Tanks (check one)

- There are no known underground storage tanks on this property. (Note exclusions such as small farm and residential motor fuel tanks, most heating oil tanks, cisterns and septic tanks, in instructions.)
- There is an underground storage tank on this property. The type(s), size(s) and any known substance(s) contained are listed below or on an attached separate sheet, as necessary.



Time of Transfer Inspection Report (DNR Form 542-0191)

Property information

Current owner GABE ADRIE
Buyer JEFF BRUMMUND Realtor MARY SOLDWICH
Mailing address 1405 TRELLINE CT. VEAUMETER, IA 50061

Site Address/County SAME AS ABOVE

No. of bedrooms 6 Last occupied Present Disposal? X IN Softener? X IN H2O supply? RURAL WATER

Records available Yes Permit/Installation date 8-21-15 Installer West Central Service

Septic system information

Septic tank(s) size 2000 material Concrete condition Good
Tank pumped? Yes date 8-20-15 licensed pumper FOREST
Septic/trash processing tank: size material condition
Tank pumped? date licensed pumper

Aerobic treatment unit (ATU) mfg: size
Tank pumped? date licensed pumper
Maintenance contract? expiration date service provider
Condition

Pump tanks/vaults: type size condition

Distribution system: distribution box outlets used condition
Header pipe(s) # of lines
Pressure dosed?

Secondary treatment:
length of absorption fields determined by
condition of fields determined by
type of trench material

Size of sand filter determined by
Vent pipes above grade? discharge pipe located?
Effluent sample taken? Results

Media filters: type COCO FILTER
Maintenance contract? Yes expiration date 12-31-15 service provider West Central Service
Condition NEW COCO FILTER

NPDES General Permit No. 4: required? No permitted? NOI submitted



Time of Transfer Inspection Worksheet

Other components:

Alarms _____ Working? _____ disinfection _____ working? _____

Control box _____ Timers _____ inspection ports _____

Other components _____

Overall condition of the private sewage disposal system:

Acceptable? Yes Unacceptable? _____

Explain (attach additional pages as needed): Replaced failed lateral
FIELD WITH NEW CDD FILTER. USING EXISTING SEPTIC
(2000 GALLON TANK) CONCRETE. PUMPED OUT AND
INSPECTED ON 8-20-15

Comments: SYSTEM IS IN GOOD WORKING CONDITION
AT PRESENT TIME

Site status at conclusion of Time of Transfer inspection:

- Verify that controls are set on the appropriate mode.
- Power is on to all components.
- Yes X Revisit all components to verify lids are secure.
- Yes X Gather all tools for removal from the site.
- Yes X Verify that no sewage is on the ground surface.

Using this worksheet, write a narrative report of the inspection results.

Submit a copy of this report, including your narrative, to the city/county environmental health office, the DNR and the county Recorder in the county where the inspection was conducted.

This report indicates the condition of the private sewage disposal system at the time of the inspection. It does not guarantee that it will continue to function satisfactorily.

Signature of Certified inspector: Jon Cornish Date: 8-21-15
 Name (print): JON CORNISH WEST CENTRAL SERVICE Certificate #: 2007
 Address: 1020 130th DEXTER, TN 37070
 Phone #: 515-249-9493